

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	1-17-01
FORMALITY REVIEW	TH	953	02-06-01
RESPONSE FORMALITY REVIEW	TZ	50947	03/14/01

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
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COPY AVAILABLE

If more than 150 claims or 10 actions  
 staple additional sheet here

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